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Bib Data Sheet

CONFIRMATION NO. 8897

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>10/749,886 | FILING DATE<br>12/31/2003<br><br>RULE | CLASS<br>702 | GROUP ART UNIT<br>2863 | ATTORNEY<br>DOCKET NO.<br>TI-36727 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/486,663 07/11/2003 *AK*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None AK*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/03/2004

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>TX | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>19 | INDEPENDENT<br>CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>AK</i>   |                           |                        |                       |                            |

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## TITLE

Wavelet analysis of one or more acoustic signals to identify one or more anomalies in an object

|                                   |   |  |
|-----------------------------------|---|--|
| FILING FEE<br><br>RECEIVED<br>942 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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